

# The Journal

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## Wanted: Non-perishable food for 'Feds Feed Families' Campaign

By Andrew Damstedt The Journal

To help keep food bank pantries full, the "Feds Feed Families" campaign is underway and Naval Support Activity Bethesda (NSAB) is contributing to the effort.

"It's to help keep the pantries stocked at the Capital Area Food Bank throughout the summer and for part of the winter," Religious Program Specialist 3rd Class Heath Steffey said. "It's to keep those stocked so people can still use them."

The food drive started June 1 and goes until Aug. 31. The non-perishable food items are donated to the Capital Area Food Bank. Since it started in 2009, nearly 70 million pounds of non-perishable items have been collected nationwide. In 2016, the campaign netted 12.5 million pounds.

Steffey encourages people to donate and hopes they realize that this food drive helps those who live in the area.

NSAB's goal is to collect 500 pounds this summer, Steffey said. In 2016, NSAB collected 400 pounds, he said.

Donation boxes are located in Building 27, the Navy Exchange ground floor, and by the Uniform Shop in the hospital. Boxes are expected to be put up in Building 17 and Building 11 near the NSAB Chaplain's Office, he said.

The Capital Area Food Bank "Most Wanted Items" are canned or dry beans; peanut butter; canned vegetables; pasta; brown and white



PHOTO BY ANDREW DAMSTEDT

Naval Support Activity Bethesda leadership has issued a challenge to fill these donation boxes with at least 500 pounds of non-perishable items as the base participates in the 'Feds Feed Families' campaign.

rice; macaroni and cheese; hot and cold cereal; canned salmon, tuna or chicken; canned fruits; juices, including juice boxes; and healthy snacks like raisins or granola bars, according to the food bank website.

Donations of fresh fruits, vegetables, herbs and nuts can be made directly to a local food pantry, which can be located at

www.ampleharvest.org. Employees are also encouraged to take advantage of gleaning, which is clearing fields of unused produce to donate to food banks. Those opportunities are listed at www. midatlanticgleaningnetwork.org.

For information about NSAB's participation contact the command chaplain's office at 301-319-5058.

## Bethesda Notebook

**Prostate Cancer Support Group** 

The Prostate Cancer Support Group meets at Walter Reed National Military Medical Center the third Thursday of every month. The next meeting will be July 20 from 1 to 2 p.m., and from 6:30 to 7:30 p.m. in the America Building, River Conference Room, third floor). Spouses and partners are invited. Military ID is required for base access to WRNMMC. For those without a military ID. call Prostate Center at 301-319-2900 at least four business days prior to event for base access. For more information, contact retired Col. Jane Hudak at 301-319-2918 or iane.l.hudak.ctr@mail.mil.

#### **Pre-retirement Seminars**

Two-day pre-retirement seminars, open to Walter Reed National Military Medical Center's Department of Defense GS employees planning to retire within the next five years, are scheduled for July 26-27, and Aug. 22-23. Pre-registration is required. Registration forms are available on the National Capital Region, Medical Directorate MD website: http://www.capmed.mil/, and on the WRNMMC and Fort Belvoir Community Hospital banners. For more information, contact dha.bethesda.wrnmmc.list. preretirement-seminar@mail.mil.

#### **Drug-free Workplace Training**

All GS civilian employees who have not attended Drug-Free Workplace Training are required to attend one of the sessions scheduled for July 18 in Memorial Auditorium from 7 to 7:30 a.m., 10 to 10:30 a.m., 1 to 1:30 p.m., or 3 to 3:30 p.m. For more information, contact Andrea Calizo at 301-319-4572 or Monte Clingerman at 301-295-0308.

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## **University Hosts Boot Camp for Prospective Surgeons**

By Sharon Holland USU Public Affairs

They didn't have to stand in formation or run through muddy obstacle courses while drill sergeants barked orders in their faces, but seven senior medical students from the F. Edward Hebert School of Medicine at the Uniformed Services University (USU) spent four arduous weeks going through their own grueling boot camp.

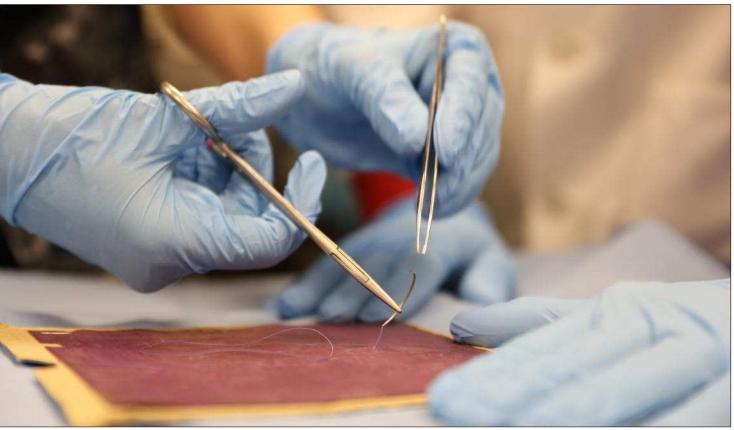
The students, Navy Ensigns Utsav Patwardhan, Elise Sienicki, Mathew Christian, Yarrow Sheldon, and Alexander Kersey, along with Army Second Lieutenants Nathan Bastien and Brook Pari, were all headed to military surgical residency programs following graduation from medical school. Faculty from the USU-Walter Reed National Military Medical Center (WRNMMC) Department of Surgery, the USU anatomy and radiology departments, along with surgical residents from WRNMMC, conducted the Surgery Boot Camp to provide the students with the knowledge and technical skills necessary to be immediately successful as they begin their post-graduate surgery training.

The boot camp was the brainchild of Army Col. (Dr.) Frederick Lough, deputy chair of the USU-WRNMMC surgery department.

"The day before medical students graduate they are filled with knowledge and have no patient responsibilities. The day after they graduate, they realize they will soon have patient responsibilities and they have limited knowledge and skill," Lough said. "While they have witnessed and have learned basic surgical tasks, it may have been months since they were required to actually perform a task such as inserting a foley catheter. The Surgery Boot Camp course was created to provide focused training in surgical skills and surgical knowledge before they begin their post-graduate training."

The month-long course critical developed to review surgical anatomy and radiographic information, to review Advanced Trauma Life Support (ATLS), how to be successful as a surgical resident, operating room conduct, pre-operative and post-operative orders, working on surgical wards, dealing with night calls, dealing with angry families, deployments, self-care and other topics.

Lough was assisted by USU faculty members Ed Jones, an instructor in the surgery department, Dr. Alan Seyfer, professor of Anatomy, Air Force radiology faculty members Col. (Dr.) Ellen Chung and Lt.Col. (Dr.) John



HOTO BY SHARON HOLLAND

Navy Lt. (Dr.) Yarrow Sheldon practices her suturing skills, one of a number of tasks students participating in the Uniformed Services University's Surgery Boot Camp reviewed prior to their graduation from USU's F. Edward Hebert School of Medicine in May.

Lichtenberger, trauma surgeon Dr. Mark Bowyer, and fourth-year Navy surgical residents Lt. Zachary Taylor and Lt. Kathryn Wolf.

The first week students had a crash course in anatomy, reviewing critical areas, including the base of the neck, chest, abdomen, and femoral vessels. From there, they moved on to a review of surgical instruments, knot tying, operative choreography (where to stand in an operating room), patient positioning, prep and draping of patients, foley insertion, video scope tower preparation, preand post-operative orders, discharge summaries, ordering blood products, operative consent, the wound vacuumassisted closure (VAC) system, and, especially relevant for military surgeons, the PUHLES system. The PULHES system is a physical profile system, which stands for Physical Capacity/Stamina, Upper Body, Lower Body, Hearing, Eyes, and Stability/ Psychiatric. Students also did a complete review of ATLS, and central line placement.

In the last two weeks, the soon-tobe surgeons did an American Board of Surgery In-Training review, and covered surgical sign—out, nutrition, conducted a stent lab, reviewed chest tube placement and removal, nursing calls, deep vein thrombosis, electrocardiogram reading, and interpreting arterial blood gases, dealing with myocardial infarctions, bleeding, pulmonary embolus, tachycardia and atrial fibrillation. They reviewed wound VAC placement and removal, and troubleshooting ostomies. Students concluded the boot camp with radiographic review — chest x-ray, computed tomography (CT) and magnetic resonance imaging (MRI) — along with an overview of operational medicine, deployment and self-care.

"There is a definite need for graduating medical students to 'top off' their knowledge and skills before they begin their graduate medical training. This unique course provided the opportunity for our students to have a focused and concentrated experience to fine tune the skills they acquired over four years at USU. This will allow our graduates to be more effective and confident as they begin the next phase of their training as military surgeons," said Lough. "We plan to follow up with them to see how we can improve our course. It is recommended that this course be expanded and formalized in the elective schedule. Rising fourthyear students have already asked to participate in next year's course and surgical residents have been selected to teach."

"The Surgery boot camp was a really rich experience, put together by USU-Walter Reed faculty and two Walter Reed residents, based on what they thought would be most important for us to know. While it's hard to choose the single best session, I think my favorite was practicing the various overnight 'nursing calls' that we could get for our patients, knowing what steps to



PHOTO BY SHARON HOLLAND

Uniformed Services University (USU) surgery instructor Ed Jones (right) observes as Navy Lt. (Dr.) Yarrow Sheldon (left) practices her suturing skills. Lt. Sheldon participated in USU's Surgery Boot Camp just prior to her graduation from the University's F. Edward Hebert School of Medicine in May.

take and when to call for help. I expect to be in many of those situations in the near future, and going over those scenarios will undoubtedly have been very beneficial," said Padwardhan. "It was a good warm-up to get into the surgical mindset. I really hope that they can expand the program for more students next year."

## **ASF Gives Sailor Different Perspective**

By MC2 William Phillips NSAB Public Affairs

When Hospital Corpsman Jason Sukhu arrived at Walter Reed National Military Medical Center he was asked if he wanted to volunteer for a collateral duty.

"I had heard while I was in 'A' school that collateral duties would help me get a good [evaluation]. So I said yes and they sent me to the ASF academy," said

He joined the Auxiliary Security Force (ASF) to put him a step ahead of his peers by having a collateral duty, but now finds ASF as a fun way to get a different perspective of other Sailors' jobs.

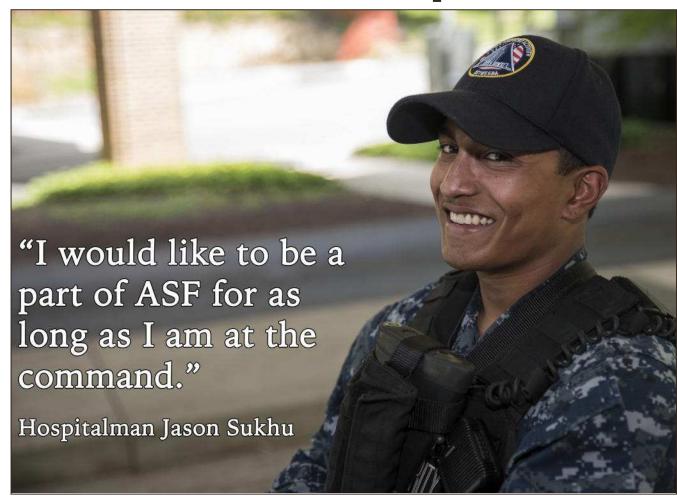
ASF personnel are active duty service members who augment base security personnel during contingencies, terrorist attacks, natural disasters, civil disturbances, exercises and special events that require heightened levels of security

"I like the mentality of the [master-at-arms]," said Sukhu. "They seem to have more camaraderie than most people on base. It makes me feel like more of a team member rather than being an [individual.]"

ASF is important to leaders like Naval Support Activity Bethesda Commanding Officer Marvin L. Jones.

"When I speak to the leaders on base about our

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U.S. Navy photo illustration by MC2 William Phillips

### **President's Physician Offers Advice To Health-Care Graduates**

By Bernard S. Little WRNMMC Command Communications

The physician to Presidents Barack Obama and Donald Trump, Navy Rear Adm. (Dr.) Ronny L. Jackson, offered the approximate 300 graduates of health-related training programs in the National Capital Consortium, four "tidbits" of advice during commencement June 23 at the Strathmore Music Center in Bethesda, Md.

"Find mentors and leaders who truly want to see you succeed, and who are in positions to further your careers. It may be somebody who you least expect, so be nice to everybody," was the first bit of advice Jackson offered the interns, residents and fellows graduating from NCC curriculums at the Uniformed Services University, Walter Reed National Military Medical Center, Fort Belvoir Community Hospital, and Malcolm Grove Medical Center.

"Determine for yourself the right place and the right time [to pursue an opportunity]," was the admiral's second bit of advice to graduates. "Don't let someone else decide if any opportunity...is the right place and



PHOTO BY BERNARD S. LITTLE

Some of the graduates of the 2017 National Capital Consortium take a moment for a group photo before commencement June 23 at The Strathmore Music Center in Bethesda, Md.

the right time for you." He encouraged the graduates to not "automatically buy-in" to those who may advise them that they "need more time under their belts or leadership experience" before they pursue certain jobs, and he used himself as an example.

Jackson explained once he became aware of his nomination for chief of the White House Medical Unit and physician to the president, several people in his chain of command suggested it may not be the right place and time for him. "While I agree... experience is always a great thing

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## MCC Hosts Cancer Research Seminar, Awareness Day

By Bernard S. Little WRNMMC Command Communications

Walter Reed National Military Medical Center's John P. Murtha Cancer Center, the only Department of Defense Center of Excellence for Cancer Care, hosted the Fifth Annual Cancer Research Seminar and Cancer Awareness Day, June 19-20, respectively, in WRNMMC's America Building.

Navy Capt. (Dr.) John R. Rotruck, WRNMMC's chief of staff, kicked off the day-long seminar stressing the importance of partnerships in health care. He said the most recent National Defense Authorization Act not only places great emphasis on military medicine supporting warfighters wherever and whenever needed and ensuring for the health readiness of the force, but also the NDAA calls for the military branches to work increasingly more across service lines in all aspects of defense, including within the DOD health-care system.

"This is certainly critical for us," Rotruck said, recognizing WRNMMC's joint effort in care, research and academia with the Uniformed Services University, National Institutes of Health's National Cancer Institute and Johns Hopkins Medical Center.

Dr. Yvonne Maddox, vice president for research at USU, agreed, adding, "The future is very, very promising as it relates to cancer research." She said the teamwork between WRNMMC, USU and NIH has resulted in numerous publications and projects advancing cancer research and care.

"There's probably not one of us in this room who

has not experienced cancer in some form or another, whether it's personally, through a family member, friend or associate," Maddox continued. "It's always rewarding to hear from a survivor, because it gives us a real sense of not only what he or she may have coped with as it relates to the disease, but it also tells us so much more about how we meet our challenges in life."

#### **A Cancer Survivor**

In November 2015, Army Spc. Blake Hornbrook was diagnosed with testicular cancer while stationed in Germany. He was successfully cared for at WRNMMC, finishing treatment in April 2016. The Army medic currently works in WRNMMC's Emergency Department.

Hornbrook praised the care he received at WRNMMC, especially that from Army Lt. Col. (Dr.) Kevin Rice, a WRNMMC urologist.

While Hornbrook was still in Germany and not long after his diagnosis there, he said Rice reached out to him via email with information about cancer and possible treatment options. This was prior to his care at WRNMMC under Rice. "He's a phenomenal surgeon and person," Hornbrook added.

Hornbrook arrived at WRNMMC on Jan. 19, 2016, and his surgery was nine days later. Following surgery, he had chemotherapy because the cancer had spread to his lymph nodes. He explained the ups and down of his care, as well as the emotional support he received from his wife as well as the providers at WRNMMC.

On April 5, 2016, Hornbrook received the good news that his cancer was in remission.

After being assigned to WRNMMC following his treatment, Hornbrook explained that he initially wanted to work in oncology, but he added the ER has been an excellent fit for him.

"Looking back, I'm very happy because I've been able to meet with people who've been diagnosed in the ER [and share my experiences]. I get to be that first-line [voice], and let them know, 'You're not alone," he added.

Army Col. (Dr.) Craig D. Shriver, director of the John P. Murtha Cancer Center, explained testicular cancer is the most common diagnosed cancer in active duty service members, with melanoma second.

Although testicular cancer has one of the highest cure rates of all cancers with an average five-year survival rate of 95 percent, Shriver stated any cancer diagnosis is a readiness concern for the military. A cancer diagnosis can take a service member "out of the fight for months, if not a year or more, for treatment and rehabilitation," he explained.

"Once a service member is diagnosed, determining treatment with minimal side effects while maximizing the treatment effect, and rehabilitating the service member," are focuses of John P. Murtha Cancer Center, Shriver explained.

One of the keynote speakers at the seminar, Dr. Jerry S. H. Lee, deputy director for the Center for Strategic Scientific Initiatives at the NCI, explained the efforts which have taken place in

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and nice to have, had I waited, I'm confident that this opportunity would have forever been gone."

The third bit of advice Jackson had for the graduates is to "aggressively take advantage of opportunities," and lastly, he encouraged them to "keep an open mind and roll with the serendipity."

Jackson said the military has offered him opportunities he could not have imaged early in his career when his intentions were to fulfill his initial service obligation and get out. "You all have opportunities that you have literally not begun to imagine," he told the graduates.

The admiral added by the time he had fulfill his initial service obligation, his views on leaving the military had changed to what it is now, that being: "I would get out if I could do the exact same job in the civilian world as I do in the Navy. Every job I've had in the Navy has been exciting, unique, and absolutely something that cannot be [easily transferred to] the civilian world.

"Where else can you go to work each day [on] a submarine...jump out of airplanes...fast rope out of helicopters...dive in sunken German battleships...swim with seals and sea lions...travel all over the planet aboard Air Force One...spend the night in Buckingham Palace...ride camels through the vintage sea of Petra... witness history firsthand from within three presidential administrations... and practice medicine abroad in [war-torn] countries, and sometimes, get into combat zones to make a real difference when your country needs you most?

"Don't waste or take for granted the unique opportunities military medicine provides you," Jackson told the graduates. "You will leave the military someday, and you will have the rest of your life to practice 'ordinary' medicine. I encourage you to try your best to practice 'extraordinary' medicine now until that time comes," he concluded.

Army Col. Michael S. Heimall, former WRNMMC director, said because of the training that NCC graduates receive, "They are so much better prepared to meet the challenges of military medicine, which is a testament to the [consortium's] faculty and program directors."

A graduating transitional intern, Army Capt. (Dr.) Opeyemi I. Oluyemi, is heading for a general medical officer tour at Schofield Barracks in Hawaii. He earned his medical degree from the Western University of Health Sciences in California through the Army's Health Professions Scholarship Program. He said he is now looking forward to a pathology rotation.

"It's great and always exciting to make that next step," Oluyemi said about graduating. "It also means more responsibility. I'm looking forward to joining the 25th Infantry Division in Hawaii," he added.

Army Maj. (Dr.) Christina S. O'Hara, a graduate of U.S. Military Academy at West Point and East Tennessee State University Quillen College of Medicine, completed her residency in the NCC's Occupational and Environmental Medicine Program. She described graduating from her residency as a "stupendous moment. I'm very, very excited to be done and on to now helping people." She will be practicing occupational medicine at Fort Sam Houston, Texas.

Air Force Maj. (Dr.) Charles G. Stahlmann graduated from the fellowship program in pulmonary and critical care medicine at WRNMMC. "It feels a little surreal after 10 years of post-graduate training," said the physician, headed to Nellis Air Force Base, Nevada. "I'm looking forward to being an attending physician and making some of my own decisions with recommendations from my patients."

Army Maj. (Dr.) Gabriel Pavey's wife, Army Maj. (Dr.) Ashleigh Pavey, graduated from a fellowship in neonatal – perinatal medicine. She will be an attending neonatologist at Madigan Army Medical Center near Tacoma, Washington. He is going

to a fellowship at the University of Washington in musculoskeletal oncology after completing his residency in the NCC.

Pavey saluted his wife for her diligence and determination in completing her fellowship, as well as being a mother, wife and Soldier. "There were a lot of long days and long nights. Being in training together is tough. It's challenging to have two physicians in training who are parents." The couple has a 3-year-old daughter, Alexandra, and an 18-month-old son, Benjamin. "She has also been a wonderful stepmom to my 12-year-old son Christian," Pavey added.

"What's impressive about this is [my wife] takes care of people in their most challenging time – new parents with sick babies," he continued. "She extremely cut out for it and does wonderfully. I've seen her interact with families and she does a wonderful job at it. It's pretty incredible to be with her today and I'm extremely proud of her."

Also during the ceremony, 15 awards were presented to graduates, faculty and staff members for excellence in research, teaching, practice and outstanding performance in graduate medical education.

Navy Lt. (Dr.) Sean A. Lacey earned

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the Outstanding Intern Award. Navy Lt. (Dr.) Serennah E. Harding received the Lt. Neil Holland Award for the house staff member who best exemplifies excellence in teaching, humanitarianism, ability as a clinician, instructor, counselor and mentor voted on by the intern class.

Army Capt. (Dr.) Adam M. Barelski earned the Outstanding Faculty Award.

Army Capt. (Dr.) Anton Vlasov (resident) and Navy Lt. Cmdr. (Dr.) Mae Wu Healy received the Gen. Graves B. Erskine Award for the Outstadning resident and fellow as determined by a selection committee.

Navy Lt. Cmdr. (Dr.) William A. Cronin earned the Maj. Gen. Lewis A. Mologne Award for the physician in training who best exemplifies those quality of the late general, including a commitment to the care of patients, loyalty to country, respect for truth, honesty and dedication to the practice of medicine as exemplified by Mologne.

Col. (Dr.) Jeffrey A. Mikita received the Vice Adm. James A. Zimble Award as the program director whose contribution, dedication and interest in teaching have significantly supported the WRNMMC GME program.

Navy Capt. (Dr.) Gregory H. Gorman earned the staff physician teacher of the year award.

Army Lt. Cols. (Drs.) Micah J. Hill and Melvin D. Helgeson earned the Lt. Gen. Claire L. Chennault faculty recognition awards for overall teaching excellence.

Navy Lt. Cmdr. (Dr.) Benjamin R. Hershey received the Chennault award for outstanding psychiatry faculty member.

Dr. Anuradha Ganesan earned the GME mentor award.

Army Lt. Col. (Dr.) John M. Csokmay III earned the Innovative Curriculum Award.

Navy Capt. (Dr.) William T. Shimeall received the Parker J. Palmer Courage to Teach Award.

Theresa Kiefer earned Program Coordinator of the Year Award.

Navy Lt. Cmdr. (Dr.) George C. Balazas and Army Maj. (Dr.) Gabriel J. Pavey earned the Bailey K. Ashford Clinical Research and Laboratory Research Awards, respectively.

And thoose earning the Robert A. Phillips Awards included: Navy Lt. (Dr.) Luke Johnston (resident clinical study); Air Force Col. (Dr.) Matthew Ritter (staff clinical study); Army Capt. (Dr.) Christopher Daniels (resident laboratory study); Army Maj. (Dr.) Kristen P. Zeligs (fellow laboratory study); and poster winners Army Capts. Elizabeth Cleveland and Ana H. Isfort.

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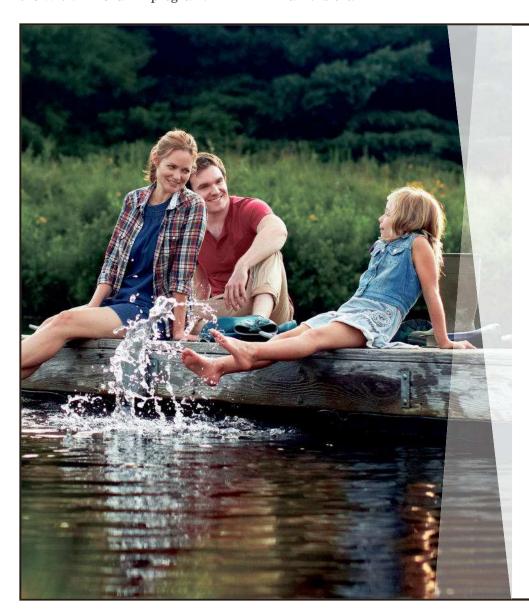
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## Clinic Highlights Skin Cancer Awareness

By AJ Simmons WRNMMC Command Communications

As the sun shines and the temperature increases, there can be no question that the summer months have arrived.

Lt. Cmdr. (Dr.) Nicholas Logemann, director of the Cutaneous Oncology Clinic at WRNMMC, highlighted the importance of skin cancer awareness for the safety of service members and civilians alike.

"Skin cancer is the most common form of cancer," said Logemann. "While typically skin cancer is not lethal, it is always most easily treatable when detected early. Delays in treatment can lead to large and deforming scars or even potentially [the cancer] spreading to other parts of the body."

Logemann pointed out that there are multiple types of skin cancer, with melanoma being the most dangerous.

Melanoma is a type of cancer triggered by the mutation of melanin-creating cells in human skin called melanocytes, according to the American Cancer Society's webpage. These cells, which typically assist in the creation of pigmentation in skin, can be damaged and mutated by exposure to the ultraviolet (UV) from the sun or a tanning bed.

While melanoma is considered to be the most dangerous type of skin cancer, it is by no means the only category. Other types of skin cancer include basal cell carcinoma (BCC) and squamous cell carcinoma (SCC), among several others. These two forms of carcinoma are often categorized together as non-melanoma skin cancers, according to physicians.

"Prevention by protection from the sun's radiation is crucial," said Logemann. "Early detection is key," he added.

He stressed it is critically important for patients who notice a bump or sore, that will not heal for many weeks, to be evaluated by a physician, regardless of



PHOTO BY AJ SIMMON

From left, Navy Lt. Cmdr. (Dr.) Nicholas Logemann, NIH Physician Dr. Isaac Brownell, Red Cross Nurse Volunteer Jennifer Allen, UC Irvine medical student Jannette Nguyen and Dermatology Resident Dr. David Martell comprise a portion of the Cutaneous Oncology Clinic team at Walter Reed National Military Medical Center. Logemann also noted the contributions of Head Dermatology Nurse Jamal Winston, Carolyn Parker and David Bitonti to the Cutaneous Oncology team.

what caused the mark. Joining this, he pointed out that patients with a mole that is different from other moles or that is changing in color, shape or size should also see a dermatologist.

Logemann also explained that patients who have a history of sunburns as well as patients whose mother, father or sibling have been diagnosed with skin cancer should strongly consider being seen for at least an initial skin exam by a dermatologist.

"The best advice I can offer is that if you or a loved one [are] worried about something, have it looked at," Logemann explained. "It typically only takes a few moments of a dermatologist's time."

The future of detection and protection of patients against the dangers associated with skin cancer is

continuously developing, according Logemann.

"There are many new medications being developed to treat advanced skin cancer," Logemann said. "These new medications promote the body's own immune system to fight off the cancer."

One new development to the Cutaneous Oncology Clinic is its addition of a semi-automated total body imaging system, a device that may help to reduce the number of skin biopsies required when testing patients for skin cancer.

"We are also hoping that [the semi-automated total body imaging systems] may reduce patient anxiety, as we can more accurately track individual skin lesions to monitor for changes," said Logemann.

He is also optimistic that in the future these imaging systems may be able to increase patients' access to their dermatologists through teledermatology, a long-distance method of performing checkups and follow-up appointments.

Logemann pointed out that while the developing skin cancer treatments have shown efficacy, they are still being investigated and tested to ensure their safety and effectiveness.

In light of this, Logemann remains focused on patients' immediate safety and awareness: "Despite these new treatments...skin cancer is always best treated early. Prevention and early detection are crucial."

The WRNMMC Cutaneous Oncology Clinic provides patients with "head to toe" skin examinations to screen for skin cancer in the hopes of providing the early detection.

"Our nurses and support staff call patients to help remind them of their need for follow-ups," Logemann said of the clinic. "They also help patients book appointments.

For more information about the Cutaneous Oncology Clinic or skin cancer detection and prevention, visit the clinic's page on the Walter Reed National Military Medical Center website, www.wrnnmc.capmed.mil.

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#### ASF

From Page 4

ASF team and request their support, I always ask them to send us their very best people," said Jones. "We need the motivated Sailor or Soldier that is sharp, dedicated — one who will sweat the small stuff and be able to catch something that other people might not catch. That's what helps keep the entire base safe."

Members of ASF are the first line of

defense when it comes to base security.

"Our ASF team is important because, along with the master-at-arms, they are our first line of defense," said Jones. "Whether it is a brand new E-1 reporting to their first duty station or the President of the United States, our ASF members are the first people they see when then they enter this base."

The ASF academy is a three-week course that teaches members how to properly do their job while standing watch.

"The ASF academy was a lot of fun," said Sukhu. "It was three weeks long and during the first week we were in class learning about the rules and the theory of how to do everything like how to take down a suspect. We also learned about the deadly force continuum. The next two weeks are the hands on portion with exercises like the [pepper spray] course and the gun range."

Sukhu said that he was able to use his training during a concert held at NSAB earlier this year.

"When I was activated for the Styx concert I was able to use a verbal deescalation technique," said Sukhu. "During the concert there was someone there that was too drunk and was being kicked out of the concert, and we had to go and de-escalate the situation by calming him down."

And, every day can be different depending on where the ASF member is

"Depending on which gate you have, it dictates what your job for the day will be. If I'm at Gate One or Gate Two it means I'll primarily be scanning IDs but if I'm at [Gate Five] then I'll be doing commercial vehicle inspections.

"I would like to be a part of ASF for as long as I'm at the command," said Sukhu.

#### **CANCER**

Page 5

regards to the Federal Cancer Moonshot initiative. In 2016, Lee was assigned to Office of the Vice President to serve as the deputy director for Cancer Research and Technology for the White House Cancer Moonshot Task Force. A few key efforts he helped coordinate included the Applied Proteogenomics OrganizationaL Learning and Outcomes Network (APOLLO), international collaborations to share molecular characterization datasets, the Blood Profiling Atlas in Cancer pilot, as well as co-chairing an interagency group focused on cancer data and technology policy issues.

Lee explained in January 2016, President Barack Obama put Vice President Joe Biden in charge of the national Cancer Moonshot effort to end cancer by doubling the rate of progress toward a cure, and making a decade of advances in cancer prevention, diagnosis, treatment and care in five years. This calls for increased sharing of research and cooperation among those in the battle against cancer. Lee stated.

Discussing how the Human Genome Project helped to better understand the genomic diversity of tumors in cancer patients, Lee said by sharing protocols and data, researchers have been able to capture, analyze and broadly disseminate differences found in cancer genomics of thousands of donors worldwide, which is one of the strategic goals of the White House Cancer Moonshot Task Force in regards to "unleashing the power of data."

Other strategic goals for the task force include new scientific breakthroughs, catalyzing accelerating bringing new therapies to patients, strengthening prevention and diagnosis, and improving patient access and care.

The seminar's other keynote speaker, Dr. Jarushka Naidoo, assistant professor of oncology at the Sidney Kimmel Cancer Center at Johns Hopkins in Baltimore, Md., discussed the clinical applications of immunotherapy for lung cancer and beyond. She focused on clinical trials of combinations of immunotherapies and other anticancer therapies for the treatment of lung cancer and other thoracic cancers, laboratory-based research for understanding how the immune system is involved in the spread of cancer, and using this knowledge to bring new treatments that harness the immune system to patients, in the form of early phase clinical trials.

Naidoo said "the excitement" concerning cancer immunotherapy involves multiple factors: specificity ("Our immune system can be specific [or] virtually infinite antigen recognition for long-term immunity or effects"); adaptability (based on tumor genetic and epigenetic changes, "therefore immunotherapy has been described as a 'living' or 'evolving' drug"); memory (durable responses even after drug discontinuation); and universality (potential anti-tumor effect regardless of tumor type).

#### **Cancer Awareness Day**

To encourage healthy lifestyles, screenings and inform people of the state-of-the-art cancer care services available at WRNMMC, the Murtha Cancer Center hosted Cancer Awareness Day on June 20 in the America Building lobby. Various WRNMMC, Murtha Cancer Center departments, and other agencies set up displays in the lobby to provide beneficiaries, staff and visitors with information about cancers, treatment, prevention and other health information throughout the day.

Keith Lewis is a prostate cancer survivor who stopped by a few of the tables at the event. He

praised the efforts of the Center for Prostate Disease Research and the Murtha Cancer Center for helping him with his cancer battle. "Right now I'm doing well. My cancer is stable and even some of the lesions have diminished."

Army Capt. Wilfredo Rumingan, a public health nurse at WRNMMC, was at one of the tables providing information concerning men's health to those who stopped by. June is Men's Health Month, celebrated to heighten the awareness of preventable health problems and encourage early detection and treatment of disease among men and boys.

The CPDR is located on the third floor of the America Building at WRNMMC. For more information, please call (301) 319-2900 or email retired Col. Jane Hudak, patient educator at CPDR, at jane.l.hudak.ctr@mail.mil. For more information about the John P. Murtha Cancer Center, call 301-295-0120 or email WRNMMC.Cancer Center@ health.mil.



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### **USU Global Health Faculty Member Participates in 'DIABLO SHIELD'**

By Sarah Marshall USU External Affairs

Army Reserve Major Dana Perkins, PhD, an assistant professor in the Global Health Division of the Uniformed Services University of the Health Sciences (USU) preventive medicine and biostatistics department, recently traveled to Tblisi, Georgia, to participate in the Defense Threat Reduction Agency's (DTRA) DIABLO SHIELD training event and field exercise, in collaboration with the FBI Weapons of Mass Destruction (WMD) directorate.

Perkins served as a subject matter expert during the exercise, April 24-28. DIABLO SHIELD emphasizes countering biological threats, and is part of the U.S. European Command's (USEUCOM) Diablo Pathways series of engagements that support the development of counter-WMD capabilities in the southeast Europe and Black Sea regions.

Working with DTRA, the FBI, and CBRN Military Advisory Teams (CMATs), Perkins observed and provided feedback on the training, which was previously provided by US-trained Georgian instructors from the Department of Emergency Management of Ministry of Internal Affairs (MoIA), via classroom and hands-on training to other MoIA contingency response teams, primarily SWAT and Hazmat response units.

As part of the exercise, Perkins also played a "bad guy," setting up a "clandestine bio lab," in which she made fake anthrax, before the lab was "raided" by SWAT. She also provided a brief demonstration on microbial contamination and human-to-human



PHOTO COURTESY DANA PERKINS

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transmission, and helped answer trainees' questions about biological threats.

In reality, she said, terrorists might use clandestine labs to produce biological or chemical weapons, or explosives — materials that pose unique risks to first responders, so it's important to recognize that a warning of an imminent threat or impending bioterrorist attack might not arrive in time to deter it. Therefore, she continued, it's critical that all countries strengthen their public health systems to be prepared for and to be able to respond to these potential biological incidents,

whether natural, deliberate, or accidental.

Perkins is an individual mobilization augmentee as well as a DTRA instructor, regularly teaching the Federal Response to Biological Incidents course. She's also dually certified by the Board of DTRA's CMAT as a master and senior CBRN Consequence Management Specialist. She regularly organized workshops in Georgia to strengthen their biodefense and public health system capabilities. Her participation in these efforts reinforces USU's strategic objective to expand the university's support for uniformed services and operation forces around the world.

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#### Wine and Weave: Patriot Wall Basket-Wednesday, August 2

4:30 pm-7:30 pm

Open to all with military base access. \$35 Class fee includes instruction, use of tools, and all supplies needed to make the basket. Register with a friend for \$2 off per basket. Liberty Price \$18\*. Register before July 24! You must be 21 with ID to consume alcohol. Don't delay, class size is limited. Class is held at Below Deck, NGIS Bldg.64. Navymwrbethesda.eventbrite.com

Deadline to register for Wine and Weave

Patriot Wall Basket- August 2-details below

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